At 3sHealth, we collaborate with our health system partners to promote creative and strategic thinking. By being innovative, we collectively find solutions to complex problems to improve quality and ensure healthcare will be sustainable for future generations. This issue of Report Card focuses on the ways that we and our health system partners drive that innovation.

Morning care for residents transformed by giving staff supplies they need

Linen handling improvements replicated throughout Wascana Rehabilitation Centre

Morning care, the time when residents get cleaned and dressed for the day, is often the only one-on-one time long-term care residents spend with a care provider. At Wascana Rehabilitation Centre (WRC) in Regina, that time was interrupted when care providers needed to get towels, sheets, and other supplies.

Now, thanks to improvement work that started on two units and has spread to others using Lean methods, care providers have found ways to ensure they have all the supplies they need on hand, fewer steps to walk, and uninterrupted time with residents.

Linen handling improvements... (continued)
“When you have what you need in the morning, it changes your whole day,” says Erica Church, continuing care aide at WRC. “Staff are more organized and residents are calmer.”

Before the new process, care aides often moved in and out of residents’ rooms, looking for morning care supplies for residents up to 27 times in a two-and-a-half-hour care routine.

“I used to look down the hallways during the morning care-time routine and see my staff walking back and forth in the halls getting supplies. Now the halls are quiet because they are in the rooms with the residents. It’s very different,” says Shauna Leonard, unit manager.

“With some residents, especially those with dementia, it can be very upsetting when staff needs to leave in the middle of the morning care routine. It can be a bad start to their day,” said Church.

Over the past 18 months, care providers, as part of Lean events, developed new processes, tested and improved them, and then helped colleagues in other units implement them.

Safety improved by eliminating hallway carts

The biggest change has been to eliminate the carts stacked with linens and supplies that used to sit in each hallway. Prior to the improvement work, the carts blocked the way for patients and were vulnerable to contamination by patients, visitors, and staff through touching, sneezing, and coughing. Those risks have now been removed, and linens are kept covered and out of the way.

Staff members now create rounding carts every morning that contain the amount of linens and supplies needed for each room. They use visual cues to signal when supplies need to be replaced, and other signage is used to indicate where clean and soiled linen should be kept. In addition, standard work for the storing and stocking of supplies, including a card system to determine the quantity of linens for each patient, has been created.

Improved inventory control and management

The improvement effort has also addressed the problem of inconsistent linen supply, a situation when staff members have too many of some items and too few of others. Each unit has now developed an adaptable standard for how much of each type of linen needs to be placed on the cart and how much needs to be ordered for the unit. Simple tracking of daily usage has eliminated waste, ensured appropriate levels of inventory, and saved steps for staff.

Staff safety and engagement

Safety has also improved because staff members handle large, heavy piles of linens less, and walking distances have been reduced during morning care by 40 per cent.

The other benefit of the improvement is staff engagement. Teams used a “pay it forward” approach to work with each other to teach the new standards and processes, and build teamwork and collaboration.

“This is the way to build staff morale and leadership,” says Kat Moyer, unit manager. “The staff are truly process owners.”

All of these improvements will not only benefit staff and residents of WRC, they will also be shared across the province by 3sHealth as part of the transition to the new provincial linen service in 2015.
“By improving linen, we know we can improve patient care and infection control,” says Jim Crawford, director of provincial linen services at 3sHealth, and the replication co-sponsor. “Using Lean, we were able to change work processes and accomplish our goals with the team at Wascana Rehabilitation Centre. And we know that these important improvements can be replicated in other facilities across the province.”

“Our residents’ environment has become less institutional and more home-like with the elimination of large carts that were in the hallway,” says Ngaire Woodroffe Brown, director of the long-term care Kaizen operations team with Regina Qu’Appelle Health Region. “It’s also a huge boon to our staff. They feel more valued and empowered – as they were involved in actually designing and implementing the improvements. It isn’t about the leaders designing improvements in their office. It doesn’t work like that anymore.”

Saskatchewan’s first formal Lean replication completed in whole facility

Improvements to morning care began with a rapid process improvement workshop in January 2013 that was a partnership between 3sHealth and Regina Qu’Appelle Health Region. After a trial period, the improvements on two units were shared with two other units, and then across the whole facility this fall. Lean methods ensured that care providers were engaged as leaders in the process development, new processes were documented as standard work that others could use, the improvements took place quickly, and savings in steps, linen quantities and time were measured.

“A lot of these ideas are ones that staff members have had for years, and now because of Lean they’ve been able to try it,” said Church.

“The biggest thing I like about Lean is the ‘do it now’ approach,” says Church. “If we have an idea, we trial it and tweak it as we go. People are saying, ‘if I have an idea, it can happen’.”

Managing change through collaboration

“How does a large, complex, multi-layered system implement change consistently and effectively?” That is a question that healthcare leaders from Saskatchewan and beyond have been grappling with for many years. But the issue has become even more critical in recent months as healthcare leaders move several new business cases into the implementation phase. For both 3sHealth and its health region and agency partners, the pressing question has become, “How can we ensure that improvements to healthcare are positioned to succeed and improve care for patients and their families across the entire province?”

During the business case development process, Governing Council found an innovative solution to the problem of successful implementation of system improvements: they created a new Transition Oversight Committee. It consists of senior leadership representatives from the Saskatchewan Cancer Agency, the health regions, and 3sHealth. The committee’s responsibilities include providing insight on communications, collaboration strategies, and project implementation plans, as well as tracking progress and resourcing needs.

The committee is all about “getting the right information to the right people at the right time,” says Bonnie Blakley, vice-president of people and culture at 3sHealth. “We have lots of people who need to be involved in implementation. This committee allows us to check in with all of these groups and see whether our ideas resonate with them.”

The Transition Oversight Committee brings leaders from across the province together as a team to improve healthcare. “This committee creates an opportunity for 3sHealth to collaborate with senior leaders in the health regions and at the Cancer Agency. These partners can provide us with strong direction and insight,” explains Blakley. “New bodies like this are driving innovation by creating a foundation of trust and teamwork.”

Scott Livingstone, CEO of the Saskatchewan Cancer Agency and Transition Oversight Committee chair, echoes Blakley’s sentiments. “Having a forum that allows us to share information and work together toward a common goal is important. It is what the people of Saskatchewan expect from their healthcare system leaders, and it allows us to really put patients and families first as we provide safe, high-quality services, care, and programs throughout this province.”
Senior leaders at 3sHealth on provincial roadshow

The purpose is to meet with every health region and agency to talk about shared services. The focus is on what we have done to date as a system, where we are now, and where are we going next.

On October 21, Andrew Will, CEO of 3sHealth, and Bonnie Blakley, vice-president of people and culture at 3sHealth, kicked off their provincial roadshow with a stop in Rosetown, where they met with senior leaders of the Heartland Health Region.

We sat down with Bonnie to find out more about the roadshow’s purpose, how things are going so far, and ask how engagement is tied to the concepts of innovation and continuous improvement.

Can you tell me what the roadshow is all about?

The province is currently working on a number of business cases related to advancing shared services throughout the Saskatchewan health system. Many of those business cases are moving out of the development phase and into implementation. As a result, the senior leadership team at 3sHealth thinks that it is an ideal time to meet with other leaders in the health regions, Ministry, and Saskatchewan Cancer Agency to have some meaningful conversations about how we are collectively moving shared services forward in our province. Specifically, the visits give us a chance to talk about the business cases that we as a health system have been working on. The tour is also an opportunity to celebrate what we have done collectively to help save the province $100 million over the past five years.

What’s the substance of the roadshow? What happens during one of these visits?

At least two senior leaders from 3sHealth meet in-person with leaders in each region and agency to deliver a short presentation on shared services. We focus on a few key elements.

“Andrew and Bonnie’s presentation was very informative and candid, and was very well received by our Operational Planning Team. Many comments after the presentation were ‘wow that really made sense when they talked about the “little we” and the “big we”’. It made it easier to understand 3sHealth’s role with the health regions and how we fit in with the overall plan.”

LeAnne Paproski
Communications coordinator
Heartland Health Region
We start by looking back at what the health system agreed to do a number of years ago with respect to advancing shared services in the province to deliver better, more sustainable care for patients and families. Next, we discuss how the Council of CEOs agreed to task the system with a number of business cases related to shared services and how, over time, we received endorsements from Governing Council to continue proceeding with this work. Finally, we summarize what we did collectively to move those business cases forward and briefly discuss where they are right now.

To date, the following business cases have been approved by Governing Council: environmental services, supply chain, and transcription services. Additional business cases, we explain, are currently in development. We also talk about what we have to do to implement the three business cases that have been approved.

Our presentation is only a small part of the proceedings. We are most interested in the dialogue and collaborative thinking that follows. We want to hear what attendees have to say about moving forward with these opportunities. We are also interested in learning how we can ensure these transformational changes will be successful, and what some of the risks are as we go forward in partnership with one another. Senior leaders are increasingly telling us what they would like to advance more quickly, and what work they would like us to stagger. That feedback is invaluable to the process and is critical to maintaining our forward momentum.

How would you characterize your visit with senior leaders in Heartland?

It was awesome! Our visit went really well. Heartland was our first stop on our provincial roadshow, and I’m very pleased to say that we had wonderful conversations. We saw a lot of enthusiasm on the part of our partners there, and a terrific willingness on everyone’s part to continue to engage and collaborate with one another on shared services.

Leaders told us some of the challenges they are experiencing and we had great discussions on how we can collectively work through some of those issues. We also got a sense of which business cases are they most looking forward to implementing.

In addition to those conversations and at the request of senior leaders in Heartland, we provided an update on the change management playbook, a document that a number of regions are now using to successfully enable change within their organizations. The playbook was developed collectively by a number of change leaders across the province, and we at 3s-Health have been hearing that many regions are finding the playbook to be quite useful in their day-to-day work of leading, implementing, and sustaining change.

What regions and agencies will you visit next?

We plan to meet with Kelsey Trail on November 25, Sunrise on December 10, Saskatoon on December 11, Prince Albert Parkland on December 16, Kelsey Trail on December 18, and Saskatchewan Cancer Agency on January 20. We are planning additional meetings with other regions and agencies.

In setting up these meetings, we are asking regions and agencies to tell us which leadership forums would benefit most from being part of these conversations. Ideally, we would like to have as many leaders present as possible. In Heartland, there were many directors and managers who were able to attend along with members of their senior leadership team.

Can you comment on the general significance of this roadshow?

I think there are three main benefits of doing a full-scale tour like the one we are doing. The first is that the roadshow gives us all a chance to re-visit why we are all on this shared services journey and how we are positively transforming the delivery of health-related services. Secondly, the roadshow gives all senior leaders in the province the opportunity to strengthen our relationships with one another and engage face-to-face. The human side of change is so important. Finally, the roadshow is important because we at 3s-Health are interested in hearing from our colleagues in order to better position the health system for success. By talking and really listening to one another, we can all learn from each other’s experiences.

How does the roadshow dovetail with the theme of innovation?

By going out and meeting with our stakeholders in person, we are strengthening these relationships and continuing to build trust with one another. Advancing shared services in healthcare is very innovative in its own right. No other jurisdiction in Canada is doing as much as we are in Saskatchewan to move forward with a wide range of shared services initiatives. Engagement and trust are critical components to ensuring success. As a system, we are moving to a model of innovation through collaboration, and the roadshow is one way that we are seeking to do just that.
New Regina laundry plant will feature innovative technology to improve patient care

When the transition to the new provincial linen service for Saskatchewan’s healthcare sector is complete, healthcare facilities will be using linen processed in a new plant that is being built in Regina by K-Bro Linen Systems. The new plant will feature a number of innovations that improve linen quality, worker safety, and efficiency, and reduce our environmental impact. Most importantly, better linens will improve patient safety and comfort.

“All of the equipment installed in the Regina plant will be brand-new and state-of-the art, using the most current technologies,” says Sean Jackson, manager for the new Regina plant. “A visually based production management software program called ‘Cockpit’ will be used to help manage the plant. Every piece of equipment will be linked to this system, which can be viewed on hand-held devices. This will allow managers to capture efficiencies in real time throughout the day.”

The production flow is designed as a “hands-off” system that uses overhead rails to transport the laundry. The only points of human intervention occur during the sorting of soiled linens at the beginning of the laundering process and the feeding of washed linens into the finishing equipment at the end. This “hands-off” method improves infection prevention and control and worker safety. The split rail system also ensures that soiled and clean linens are never in the same area of the plant, which is an important safety and infection prevention and control measure.

Other infection prevention and control measures include the practice of “universal precautions,” which require that all soiled linens coming into the plant are treated as though they are contaminated. All employees working on the soiled linens side of the plant must pass through a wash-up area before they are allowed to enter the clean side of the plant. Lastly, samples of linen will be sent monthly to a third-party laboratory to test for microbial growth, ensuring the effectiveness of all plant processes.

There are other elements of the plant design that contribute to worker safety and comfort. Recognizing the value of natural light, the new facility contains strategically placed skylights that create a bright and safe environment. Overhead rails and slings that transport large amounts of linens are not located...
in areas where staff members work throughout the day. Staff break areas are spacious and have natural light.

Environmental impact is an important factor in the design of the new plant. It will be equipped with the latest batch tunnel washers, designed to maximize wash quality and optimize water use. After the filtering and re-heating processes, rinse water is captured and re-used, reducing the amount of incoming water consumed. Incoming fresh water will enter the plant at approximately 1 C. This cold water is heated by a combination of hot water heaters and a heat exchanger. The heat exchanger uses excess heat from previously heated water and raises the temperature of the incoming fresh water to a temperature of 23 C, reducing the amount of energy required to create warm water. Another innovation—“light harvesting”—automatically dims the energy-efficient fluorescent lighting by sensing incoming natural light. This, too, reduces energy consumption and leaves a lighter environmental footprint.

The new provincial linen service was created to provide high-quality linen services to healthcare facilities and their patients and residents. New high-quality products, energy saving processes, and laundering innovations at the new K-Bro plant will make a difference in the quality of the patient experience.
Job postings are now more provincial than ever...

Thanks to recent efforts to interface two prominent healthcare career websites in Saskatchewan

Since August 21, hiring managers all throughout the health system now have the ability to select whether or not they want a job posting in Gateway Online to also appear on another important health recruitment website called www.healthcareersinsask.ca.

The significance of this change is that job postings in Gateway are now more widely available to prospective applicants who are looking for new opportunities in the Saskatchewan health system. This added functionality is also a time-saving measure for many health region and Saskatchewan Cancer Agency employees who are involved in the position recruitment process.

“The Gateway Online feed is working amazing for us,” said Brittany Laviolette, project manager with Sask Docs, the organization that runs the healthcareersinsask.ca website. “I know for a fact that the regions are so happy with these changes, and the changes are saving them a ton of work.”

“Our region uses the Health Careers in Saskatchewan website for posting all of our jobs,” explains Jana Labatte, employment service coordinator with Sun Country health region. “When we changed to the Gateway Online system last year, we had to manually add all of our job postings to that system every week. This took almost a day of manpower depending on the volume.

“When the Gateway interface occurred, we were elated because that freed up more time for recruiting versus administration work. Also, there is no chance of human error.”

Now if employers initiate a job posting in Gateway, they just have to indicate whether or not they want that job posted outside of Gateway. If they select “yes,” a multi-step process involving back-end technology runs at the end of each work day to make that position show up in both Gateway and the healthcareersinsask.ca website. This improvement builds on work done earlier this year to create more of a provincial job board in Gateway.

On April 23, Regina Qu’Appelle Health Region—the only health region in the province with their own version of Gateway Online—began having their job postings appear in the provincial version of Gateway (the one used by all other regions and agencies). Also on April 23, job postings on the provincial Gateway Online website started appearing on the RQHR version of Gateway. Since then, job postings at all Saskatchewan health regions, the Saskatchewan Cancer Agency, 3sHealth, and two affiliates in Regina are now much more accessible to health system workers.

The benefits of both improvements are that employees now have access to more job opportunities than ever before, no matter where those opportunities are based. These moves are also enhancing the recruitment process by giving employers access to a bigger pool of prospective candidates.